

**REPORT OF WASTEWATER TANK  
ABANDONMENT**

**PUBLIC HEALTH  
SEATTLE & KING COUNTY**

Instructions for completing form: This form is to be completed by any persons permanently removing a septic tank, seepage pit, cesspool, or other on-site sewage system wastewater tanks from service. Complete and submit this report to the health officer within thirty (30) days of the abandonment. Authority: Chapter 13.04.054, the Code of King County Board of Health, Title 13.

**Return Completed Form to the Following Address:**

**Eastgate Public Health Center  
14350 SE Eastgate Way  
Bellevue, WA 98007**

**Phone (206) 296-4932**

**Date Received:**

**General Information (Please print):**

Name of Owner/Occupant of Property: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Date of Report: \_\_\_/\_\_\_/\_\_\_

**Wastewater Tank Data:**

Type of Sewage Tank: \_\_\_ Septic Tank \_\_\_ Pump Tank \_\_\_ Holding Tank \_\_\_ Other: \_\_\_\_\_  
Number of Compartments Pumped: \_\_\_\_\_  
Number of Gallons Pumped: \_\_\_\_\_

Checklist Item	Yes	No	Not Applicable	Comments
Septage removed by an approved pumper?*				
Tank lid removed or destroyed?				
Tank void filled with compacted soil?				

\*OSS Pumper Name: \_\_\_\_\_  
King County Certification Number: \_\_\_\_\_

**Reason for wastewater tank abandonment:**

\_\_\_ Property being served by public sewers \_\_\_ Property being served by replacement tank

**Comments:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_